

7-30-04

PATENT 450100-03537

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s)

Toshihiro MORITA et al.

Serial No.

09/975,798

For

INFORMATION PROCESSING APPARATUS AND

METHOD, AND PROGRAM STORING MEDIUM

Filed

October 11, 2001

Examiner

O Neal Rajan Mistry

Art Unit

2173

745 Fifth Avenue New York, NY 10151

EXPRESS MAIL

Mailing Label Number:

EV195877028US

Date of Deposit:

July 29, 2004

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" Service under 37 CFR 1.10 on the date indicated above and is addressed to: Mail Stop Amendment Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Technology Center 2100

(Signature of person mailing paper or fee)

AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated April 28, 2004, please amend the above-identified application as follows:



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Toshihiro MORITA et al.

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Mail Stop Amendment **Commissioner for Patents**

P.O. Box 1450, Alexandria, VA 22313-1450

Dear Sir:

745 Fifth Avenue New York, NY 10151

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Transmitted herewith is an amendment in the above-identified application.

Technology Center 2100

No additional fee is required. The fee has been calculated as shown below.

This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra		(6) Rate	(7) Additional Fee
Total claims	3	Minus	** =20	*	х	\$18 (9)	= \$
Independent claims	3	Minus	** =3	*	х	\$86 (43)	= \$
		Total ad	Total additional fee for this amendment				\$

- If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- If the highest number of total claims previously paid for is less than 20, write "20" in this space.
- *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.
- This application contains a multiple dependent claim. The required fee of \$290(145) has been previously paid , or is paid herewith .
- This response is being filed within the <u>first</u> month following the expiration of the term originally set therefor. This is a petition to request a one-month extension of time. A check covering the cost of the petition is enclosed.
- \triangle A check in the amount of \$\frac{110.00}{}\$ is attached, which covers the cost of \square additional claims \underline{X} petition for extension of time.
- Charge \$____ to Deposit Account No. 50-0320.
- Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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(Signature of person mailing paper or fee)

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP

Attorneys for Applicants

Dennis M. Smid Reg. No. 34,930

Tel: 212-588-0800